Moultonborough Recreation Department PO Box 411 – 10 Holland Street Moultonborough, NH 03254 603-476-8868

www.moultonborough.org

Name:	Name of Child(ren) if applicable:
Primary Contact Number:	Email:
Mailing Address:	Physical Address:
Sport(s) Interesting in Coaching:	Level: K 1-2 Grade 3-4 Grade 5-6 Grade
Please list any sports you have coached:	
Please list any sports you have played or had experience with: (not a requirement)	
Why do you want to coach youth sports?	
, , ,	
What is the history to be allowed for increase the property to the day?	
What is the biggest challenge facing youth sports today?	
What do you think are the three most important things a child should get out of participating in	
youth sports? 1.	
2.	
3.	
What are your thoughts about coaching your own child? (if applicable)	
Would you like an assistant coach? Please note that the recreation department will assign	
coaches to levels and teams, all requests must go through the Assistant Recreation Director.	
[] YES [] NO comments/requests:	
Additional Comments or Information:	
By signing your initials, you agree to attend all mandatory coaches training, parent meeting,	
sign a code of conduct, be at all team practices and games, consent to a background check, and acting as a positive volunteer/representative for the Moultonborough Recreation Department.	
[initial here:	